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**APPLICANTS**  
Diana Xiaobing Ma, Saratoga, CA;  
Sy Yuan Shieh, Palo Alto, CA;  
Yan Ye, Saratoga, CA;  
Tetsuya Ishikawa, Saratoga, CA;  
Gary C. Hsueh, Cupertino, CA;

**\*\* CONTINUING DATA \*\*\*\*\*** *Ab Malone*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *AbM. (none)*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 09/28/2001**

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Verified and Acknowledged  
Examiner's Signature: *Ab Malone* Initials: *AbM*

**ADDRESS**  
APPLIED MATERIALS, INC.  
Patent Department  
P. O. Box 450A  
Santa Clara, CA 95052

**TITLE**  
Integrated system for oxide etching and metal liner deposition

<b>FILING FEE RECEIVED</b> 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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